## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying								
7		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
DAVID J POWS NUTTER MCCLE WORLD TRADE 155 SEAPORT BI		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703)-746-4000, on the date indicated below.							
BOSTON, MA 02210-2604					Dayid J	-Rowsner )		(Depositor's name)	
						<u> </u>	$\leq$	(Signature)	
						2/3/04		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAME	RST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/005,217	10/005,217 12/05/2001			aidarev		010470	8598		
TITLE OF INVENTION: P	AYOUT DISTRIBUTIONS	FOR GAMES OF	CHANCE	li i	2/07/2004 WASFA	12 0000005	B 10005217		
				i (	1 FC:2501 2 FC:1504		685.0 300.0		
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	ΡŬ	BLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	nonprovisional YES \$665			\$300		\$965		12/03/2004	
EXAMINER		ART UNIT		CL	ASS-SUBCLASS	7			
MENDOZA, ROBERT J		3713			463-025000	_			
1. Change of correspondence	e address or indication of "Fo	ee Address" (37	2. For pri	nting on t	he patent front page, l	ist	David J.	Powsner	
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent or agents OR, alternatively,			1	McClennen & Fish, L	
Torsb/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	T (print o	r type)				
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will app T a substitute	ear on the for filing	ne patent. If an assig an assignment.	nee is identifie	d below, the do	ocument has been filed for	
(A) NAME OF ASSIGN	IEE	(E	) RESIDEN	CĘ: (CIT	Y and STATE OR CO	UNTRY)			
ProfitLog	ic, Inc.			Cambri	dge, MA				
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the p	patent):	Individual 🗴 C	Corporation or o	other private gro	oup entity Government	
4a. The following fee(s) are	enclosed:	41	Payment of	` '					
Issue Fee			△ A check	in the an	ount of the fee(s) is e	nclosed.			
Advance Order - # o	small entity discount permitte f Copies10	ed)	The Dir Deposit Acc	ector is h	ereby authorized by onber	s attached i tharge the requestions: ene	encies in fired fee(s), or o	credit any overpayment, to opy of this form).	
5. Change in Entity Status	(from status indicated above	)	•	-				·· /·	
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	b. Appli	cant is no	longer claiming SMA	LL ENTITY s	tatus. See 37 CF	FR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	e Fee and Publica vill not be accepted	tion Fee (if a I from anyon Office	ny) or to	re-apply any previous an the applicant; a reg	ly paid issue fe	e to the applica y or agent; or th	tion identified above. e assignee or other party in	

Registration No. 31,868 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Date\_12/3/04

PTO/SB/17 (10-03)
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FFE TO A NORMITTAL	Complete if Known							
FEE TRANSMITTAL		Applic	ation	Numbe	er 10/005,217-Conf.#8598	10/005,217-Conf.#8598		
for FY 2005		Filing Date			December 5, 2001	December 5, 2001		
Effective 10/01/2004. Patent fees are subject to annual revision.		First Named Inventor			ntor Peter Gaidarev			
Effective 10/01/2004. Patent lees are subject to annual revision	[	Examiner Name			Robert J. Mendoza			
X Applicant claims small entity status. See 37 CFR 1.27	Art Unit				3713			
TOTAL AMOUNT OF PAYMENT (\$) 1,015.00		Attom	ey Do	ket No	o. 104704-0008			
METHOD OF PAYMENT (check all that apply)			_	FEE	CALCULATION (continued)			
X Check Credit Money Other None  Deposit Account:	3. ADDITIONAL FEES							
Deposit Account 141449	Large Fee	Fee	Fee	Entity				
Number	Code	(\$)	Code	(\$)	Fee Description	Fee Paid		
Deposit Account Nutter McClennen & Fish LLP	1051	130	2051	65	Surcharge - late filing fee or oath			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.			
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English specification			
	1812	2,520	1812		For filing a request for ex parte reexamination			
X Charge any additional fee(s) or any underpayment of fee(s)			1804	920*	Requesting publication of SIR prior to			
Charge fee(s) indicated below, except for the filing fee	1804	920*			Examiner action Requesting publication of SIR after			
to the above-identified deposit account.	1805	1,840*	1805		Examiner action			
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month			
1. BASIC FILING FEE Large Entity Small Entity	1252 1253	420 950	2252 2253	210 475	Extension for reply within second month  Extension for reply within third month			
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254		Extension for reply within fourth month			
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255					
1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee	1401	330	2401	165	Extension for reply within fifth month  Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive – unavoidable			
	1453	1,330	2453	665	Petition to revive - unintentional	605.00		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501 1502	1,330 480	2501 2502	665 240	Utility issue fee (or reissue) Design issue fee	685.00		
Total Claims -20** = x = x	1502	640	2502	320	Plant issue fee			
Independent -3** = x	1460	130	1460	130	Petitions to the Commissioner			
Claims *	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)			
	1806	180	1806	180	Submission of Information Disclosure Stmt			
Large Entity   Small Entity   Fee Fee Fee Fee Fee Fee Fee Description	8021	40	8021	40	Recording each patent assignment per			
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	property (times number of properties) Filing a submission after final rejection (37 CFR 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invention to be			
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	examined (37CFR 1.129(b)) Request for Continued Examination (RCE)			
over original patent	1802	900	1802	900	Request for expedited examination			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		fee (spe		8001	of a design application  10 Printed copy of patent w/o color	330.00		
SUBTOTAL (2) (\$) 0.00		ree (spe	• •	-				
**or number previously paid, if greater, For Reissues, see above	Redu	iceu by t	odsiC FI	my ree	Paid SUBTOTAL (3) (\$)	1,015.00		
SUBMITTED BY	=				(Complete (if applicable))			
Name (Print/Type) David J. Powsner		ration No		868	Telephone (617) 439-2000	· · · · · · · · · · · · · · · · · · ·		
	Attome	ey/Agent)		,	<del></del>			
Signature	_				Date			
· C V								

Fee Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.Q. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Signature: (David J. Powsner)